

## ARCHITECTURE &amp; ENGINEERING DEPARTMENT

PROJECT: Groundwater Assessment at Chino  
Airport – Install Monitoring WellsPROJECT MANAGER: Bob MarlinCONSTRUCTION ESTIMATE: \$50,000PROJECT #: 20341PLAN FEE: \$25.00BID DATE: December 21, 2004 @ 2:00 p.m.PREBID DATE: December 14, 2004 @ 10:00 a.m.

Chino Airport, 7000 Merrill Avenue, Chino

ADDENDUMS  
DATES

1	2	3	4	5

PLAN HOLDER		STATUS				
LAYNE CHRISTENSEN	GENERAL	SUB	SUPPLIER	_____ 1	SET(S) OF PLANS	
11001 ETIWANDA AVENUE				_____	RECEIPT NO.	
FONTANA, CA 92337				_____ \$25.00	TOTAL	
				DATE	12/14/04	
PHONE #909-390-2833						
FAX #909-390-6097				ADD- 1 2 3 4 5	X	
WDC EXPLORATION WELLS	GENERAL	SUB	SUPPLIER	_____ 1	SET(S) OF PLANS	
5566 ARROW HIGHWAY				_____	RECEIPT NO.	
MONTCLAIR, CA 91763				_____ \$25.00	TOTAL	
				DATE	12/14/04	
PHONE #909-931-4014						
FAX #909-931-4017				ADD 1 2 3 4 5		
	GENERAL	SUB	SUPPLIER	_____	SET(S) OF PLANS	
				_____	RECEIPT NO.	
				_____	TOTAL	
				DATE	_____	
PHONE #						
FAX #				ADD 1 2 3 4 5		
	GENERAL	SUB	SUPPLIER	_____	SET(S) OF PLANS	
				_____	RECEIPT NO.	
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## NON-BIDDERS LIST

PLAN HOLDER		STATUS			
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<b>CMD/DCS</b>	<b>E N E R G Y</b>	<b>U B I L I T Y</b>	<b>U P P L I E R</b>	_____ RECEIPT NO.
2625 MANHATTAN BEACH BLVD., #110				_____ TOTAL
REDONDO BEACH, CA 90278				DATE _____
PHONE # 800-424-3996				CONTACT: Rob Dowd
FAX # 877-509-8463				
ADD-1 2 3 4 5				
<b>F. W. DODGE</b>	<b>G E N E R A L</b>	<b>S U B</b>	<b>S U P P L I E R</b>	_____ SET(S) OF PLANS
720 CARNEGIE DRIVE, SUITE 130				_____ RECEIPT NO.
SAN BERNARDINO, CA 92408				_____ TOTAL
PHONE # 890-9828				DATE _____
FAX # 890-9879				CONTACT: MARILYN DU FRESNE
ADD-1 2 3 4 5				
<b>HI-DESERT PLAN ROOM</b>	<b>G E N E R A L</b>	<b>S U B</b>	<b>S U P P L I E R</b>	_____ SET(S) OF PLANS
15353 ANACAPA RD, SUITE 1				_____ RECEIPT NO.
VICTORVILLE, CA 92392				_____ TOTAL
PHONE #760-243-2111				DATE _____
FAX #760-243-2131				
ADD-1 2 3 4 5				
	<b>G E N E R A L</b>	<b>S U B</b>	<b>S U P P L I E R</b>	_____ SET(S) OF PLANS
				_____ RECEIPT NO.
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PHONE #					ATTN: _____
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